

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF

Arcadio S. Acuna

COURT CASE NUMBER

3:07-5423 VRW

DEFENDANT

Lea Ann Chrones et al.

TYPE OF PROCESS

Order, Complaint, Summons

SERVE
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

M. Hunter Former Acting Warden of CSP-LAC

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

44750 60th St. W, Lancaster, CA 93536

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
Pelican Bay State Prison C-10-119
P.O. Box 7500
Crescent City, CA 95532Number of process to be
served with this Form 285

1

Number of parties to be
served in this caseCheck for service
on U.S.A.RECEIVED
UNITED STATES MARSHAL
NORTHERN DISTRICT
OF CALIFORNIA
09 APR -9 PM 3:22SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,
All Telephone Numbers, and Estimated Times Available for Service):

Fold

Signature of Attorney other Originator requesting service on behalf of:

Simone Volk☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

4/7/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

1

District of
Origin

No. 11

District to
Serve

No. 22

Signature of Authorized USMS Deputy or Clerk

R. Jackson

Date

4/12/08

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described
on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Address (complete only different than shown above)

Date

Time

☐ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

\$8.00

Total Mileage Charges
including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or
(Amount of Refund*)

\$0.00

REMARKS:

5/1/08 - mailed summons w/299 form
4/11/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment,
if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL
United States District Court
for the
Northern District of California

TO: M. Hunter
California State Prison - LAC
44750 60th Street, West
Lancaster, CA 93536-7620

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chrones et al

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

You **MUST COMPLETE** the acknowledgment part of this form below, **AND RETURN COPIES 1 AND 2** to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Recho, U.S. Marshal
Signature (USMS Official) - R. Jackson, Clerk

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave, Suite 1100
Street Number and Street Name or P.O. Box No.

Attorney in Fact
Relationship to Entity/Authority to Receive

San Francisco, CA 94102
City, State and Zip Code

6/11/08
Service of Process

6/11/08
Date of Signature

[Signature]
Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

JSM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN


See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Arcadio S. Acuna		COURT CASE NUMBER 3:07-5423 VRW	
DEFENDANT Lea Ann Chrones et al.		TYPE OF PROCESS Order, Complaint, Summons	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN		
	M. Hunter -LAC & CDCR - Former Acting Warden of CSP-LAC		
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 9838 Old Placeville Rd. , Sacramento, CA 95827		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285	
Arcadio S. Acuna ID# C-43165 Pelican Bay State Prison C-10-119 P.O. Box 7500 Crescent City, CA 95532		Number of parties to be served in this case	
		Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney or Originator requesting service on behalf of: 	<input checked="checked" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE 4/7/08
---	--	------------------	----------------

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
	<u>1</u>	No. <u>11</u>	No. <u>97</u>	<u>F. Gonzalez</u>	<u>4/16/08</u>

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served <i>(if not shown above)</i>	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address <i>(complete only different than shown above)</i>	Date	Time <input type="checkbox"/> am <input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy	

Service Fee \$8.00	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits 0	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS: 5/1/08 - mailed summons w/ 299 Form
6/11/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 12/15/80
Automated 01/00

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court
for the
Northern District of California

TO: M. Hunter
California State Prison - LAC
44750 60th Street, West
Lancaster, CA 93536-7620

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chrones et al

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

You **MUST COMPLETE** the acknowledgment part of this form below, **AND RETURN COPIES 1 AND 2** to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Recho, U.S. Marshal
Signature (USMS Official) R. Jester, Clerk

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave, Suite 1100
Street Number and Street Name or P.O. Box No.

San Francisco, CA 94102
City, State and Zip Code

[Signature]
Signature

Attorney in Fact
Relationship to Entity/Authority to Receive

6/11/08
Service of Process

6/11/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF
Arcadio S. AcunaCOURT CASE NUMBER
3:07-5423 VRW - 7 PM 3:58DEFENDANT
Lea Ann Chrones et al.TYPE OF PROCESS
Order, Complaint, SummonsSERVE
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

M. Hunter -LAC & CDCR-Former Acting Wrden of CSP-LAC

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

CSP-L. A. County 44750 60th Street, West, Lancaster, CA 93536-7620 (Attn. Curtis Carson - Lit. Coordinator)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
Pelican Bay State Prison C-10-119
P.O.Box 7500
Crescent City, CA 95532Number of process to be
served with this Form 285

1

Number of parties to be
served in this caseCheck for service
on U.S.A.SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,
All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney other than originator requesting service on behalf of:

SIMONE VOLTZ

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

08/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

1

District of
Origin

No. 11

District to
Serve

No. 12

Signature of Authorized USMS Deputy or Clerk

Date

4/24/08

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described
on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Address (complete only different than shown above)

Date

Time

☐ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

\$8.00

Total Mileage Charges
including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or
(Amount of Refund*)

\$0.00

REMARKS:

7/1/08 - Mailed Summons w/299 Form

4/11/08 Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment,
if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL
United States District Court
for the
Northern District of California

TO: M. Hunter
California State Prison - LAC
44750 60th Street, West
Lancaster, CA 93536-7620

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chrones et al

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

You **MUST COMPLETE** the acknowledgment part of this form below, **AND RETURN COPIES 1 AND 2** to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Recho, U.S. Marshal
Signature (USMS Official) - R. Jackson, Clerk

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave, San Francisco
Street Number and Street Name or P.O. Box No.
San Francisco, CA 94102
City, State and Zip Code
[Signature]
Signature

Attorney in Fact
Relationship to Entity/Authority to Receive
6/11/08
Service of Process
6/11/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Arcadio S. Acuna	COURT CASE NUMBER 3:07-5411-VBW PH 3:57
DEFENDANT Lea Ann Chrones et al.	TYPE OF PROCESS Order, Complaint, Summons

**SERVE
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

G. Williams - CDCR - Correctional Officer

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

9838 Old Placeville Rd., Sacramento, CA 95827

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
Pelican Bay State Prison C-10-119
P.O. Box 7500
Crescent City, CA 95532

Number of process to be served with this Form 285

Number of parties to be served in this case

Check for service on U.S.A.

RECEIVED
UNITED STATES MARSHAL
NORTHERN DISTRICT
OF CALIFORNIA
03 APR -9 PM 3:42

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney other Originator requesting service on behalf of:

Smone Volta

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

4/7/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 11	District to Serve No. 97	Signature of Authorized USMS Deputy or Clerk <i>R. Jack</i>	Date 4/16/08
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date Time ☐ am ☐ pm

Signature of U.S. Marshal or Deputy

Service Fee \$8.00	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits 0	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS: 5/1/08 - Mailed w/ 299 Form

5/14/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court
for the
Northern District of California

TO: Gary Williams
California Dept. of Corrections & Rehabilitation
Office of Correctional Safety
2880 Sunrise Boulevard, Suite 130
Rancho, CA 95742

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chrones, et al

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

You **MUST COMPLETE** the acknowledgment part of this form below, **AND RETURN COPIES 1 AND 2** to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Rocha, U.S. Marshal
Signature (USMS Official)
F. Rocha, Clerk

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave.
Street Number and Street Name or P.O. Box No.
San Francisco, CA 94102
City, State and Zip Code
[Signature]
Signature

Attorney in Fact
Relationship to Entity/Authority to Receive
5/14/08
Service of Process
5/14/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Arcadio S. Acuna	COURT CASE NUMBER 3:07-5423 VRW
DEFENDANT Lea Ann Chrones	TYPE OF PROCESS Order, Complaint, Summons

**SERVE
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
Gary Williams CDCR-Correctional Officer
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
CDCR-Office of Correctional Safety 2880 Sunrise Blvd., Ste 130, Rancho Cordova, CA 95742 (attn. Everett Fischer)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
Pelican Bay State Prison C-10-119
P.O.Box 7500
Crescent City, CA 95532

Number of process to be served with this Form 285

1

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE
6/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated.
(Sign only for USM 285 if more than one USM 285 is submitted)

Total Process

1

District of Origin
No. 11

District to Serve
No. 91

Signature of Authorized USMS Deputy or Clerk

Date

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date Time ☐ am ☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

18.00

Total Mileage Charges including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or (Amount of Refund*)

\$0.00

REMARKS: 3/1/08 - Mailed Summons w/299 Form
5/14/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court
for the
Northern District of California

TO: Gary Williams
California Dept. of Corrections & Rehabilitation
Office of Correctional Safety
2880 Sunrise Boulevard, Suite 130
Rancho, CA 95742

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chrones, et al

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

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YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

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If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Rocha, U.S. Marshal
Signature (USMS Official) F. Rocha, Clerk

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave
Street Number and Street Name or P.O. Box No.
San Francisco, CA 9402
City, State and Zip Code
Charles V. [Signature]
Signature

Attorney in Fact
Relationship to Entity/Authority to Receive
5/14/08
Service of Process
5/14/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Arcadio S. Acuna	COURT CASE NUMBER 3:07-5423 VRW
DEFENDANT Lea Ann Chrones	TYPE OF PROCESS Order, Complaint, Summons

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
Everett Fischer CDCR-Correctional Officer
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
CDCR-Office of Correctional Safety 2880 Sunrise Blvd., Ste 130, Rancho Cordova, CA 95742 (attn. Everett Fischer)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
Pelican Bay State Prison C-10-119
P.O.Box 7500
Crescent City, CA 95532

Number of process to be served with this Form 285

1

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

RECEIVED
UNITED STATES MARSHAL
NORTHERN DISTRICT
OF CALIFORNIA
08 APR 16 PM 4:13

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

4/16/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 11	District to Serve No. 91	Signature of Authorized USMS Deputy or Clerk <i>R. J. [Signature]</i>	Date 4/21/08
---	--------------------	------------------------------	-----------------------------	--	-----------------

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date Time ☐ am ☐ pm

Signature of U.S. Marshal or Deputy

Service Fee \$8.00	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits \$	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
-----------------------	---	----------------	---------------	------------------------	---

REMARKS: 5/1/08 - Mailed Summons w/299 form
5/14/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL
United States District Court
for the
Northern District of California

TO: Everett W. Fisher
California Dept. of Corrections & Rehabilitation
Office of Correctional Safety
2880 Sunrise Boulevard, Suite 130
Rancho, CA 95742

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chrones, et al

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

You **MUST COMPLETE** the acknowledgment part of this form below, **AND RETURN COPIES 1 AND 2** to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Rocha, U.S. Marshal
Signature (USMS Official) - R. Jordan

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave
Street Number and Street Name or P.O. Box No.
San Francisco, CA 94102
City, State and Zip Code
Charles
Signature

Attorney in Fact
Relationship to Entity/Authority to Receive
5/14/08
Service of Process
5/14/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF

Arcadio S. Acuna

COURT CASE NUMBER

3:07-5423 VRW

DEFENDANT

Lea Ann Chrones et al.

TYPE OF PROCESS

Order, Complaint, Summons

**SERVE
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

Everett W. Fisher - CDCR - Correctional Officer

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

9838 Old Placeville Rd., Sacramento, CA 95827

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
Pelican Bay State Prison C-10-119
P.O. Box 7500
Crescent City, CA 95532Number of process to be
served with this Form 285Number of parties to be
served in this caseCheck for service
on U.S.A.SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,
All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

DATE

4/7/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINEI acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

1

District of

Origin
No. 11

District to

Serve
No. 99

Signature of Authorized USMS Deputy or Clerk

R. J. Foster

Date

4/16/08

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Address (complete only different than shown above)

Date

Time

☐ am☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

\$8.00

Total Mileage Charges
including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or
(Amount of Refund*)

\$0.00

REMARKS

5/1/08 Mailed Summons w/299 form
5/14/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment,
if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 12/15/80
Automated 01/00

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court
for the
Northern District of California

TO: Everett W. Fisher
California Dept. of Corrections & Rehabilitation
Office of Correctional Safety
2880 Sunrise Boulevard, Suite 130
Rancho, CA 95742

Civil Action, File Number CV07-05423-VRW

Arcadio S. Aguina

v.

Lea Ann Chrones et al

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

You MUST COMPLETE the acknowledgment part of this form below, AND RETURN COPIES 1 AND 2 to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Rocha, U.S. Marshal
Signature (USMS Official) - R. Jordan Clark

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave
Street Number and Street Name or P.O. Box No.
San Francisco, CA 94102
City, State and Zip Code
Signature

Attorney in Fact
Relationship to Entity/Authority to Receive
5/17/08
Service of Process
5/14/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

USM Form-299
Rev. 10/03
Automated 10/03

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF
Arcadio S. Acuna

08 APR 7 CASE NUMBER
3:07-5423 VRW

DEFENDANT
Lea Ann Chrones et al.

TYPE OF PROCESS
Order, Complaint, Summons

SERVE AT NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
D. Hawke - CDCR - Correctional Officer
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
9838 Old Placeville Rd., Sacramento, CA 95827

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
Pelican Bay State Prison C-10-119
P.O. Box 7500
Crescent City, CA 95532

Number of process to be served with this Form 285

Number of parties to be served in this case

Check for service on U.S.A.

RECEIVED
UNITED STATES MARSHAL
08 APR -9 PM 3:30
NORTHERN DISTRICT
OF CALIFORNIA

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney, other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

4/7/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 11	District to Serve No. 97	Signature of Authorized USMS Deputy or Clerk R. J. [Signature]	Date 4/14/08
---	--------------------	------------------------------	-----------------------------	---	-----------------

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date Time ☐ am ☐ pm

Signature of U.S. Marshal or Deputy

Service Fee 8	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits 0	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
------------------	---	----------------	---------------	-----------------------	---

REMARKS: 5/1/08 - Mailed summons w/ pay form
5/14/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court
for the
Northern District of California

TO: Devan Hawkes
California Dept. of Corrections & Rehabilitation
Office of Correctional Safety
2880 Sunrise Boulevard, Suite 130
Rancho, CA 95742

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chronos et al

RECEIVED
UNITED STATES MARSHAL
08 MAY 19 AM 11:12
NORTHERN DISTRICT
OF CALIFORNIA

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure and California State law.

You **MUST COMPLETE** the acknowledgment part of this form below, **AND RETURN COPIES 1 AND 2** to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Rocha, U.S. Marshal
Signature (USMS Official)
R. Jordan Clerk

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave
Street Number and Street Name or P.O. Box No.
San Francisco, CA 9402
City, State and Zip Code
Signature

Attorney in Fact
Relationship to Entity/Authority to Receive
5/14/08
Service of Process
5/14/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF

Arcadio S. Acuna

COURT CASE NUMBER

3:07-5423 VRW -7 PM 3:57

DEFENDANT

Lea Ann Chrones

TYPE OF PROCESS

Order, Complaint, Summons

SERVE
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN.

D. Hawke CDCR-Correctional Officer

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

CDCR-Office of Correctional Safety 2880 Sunrise Blvd., Ste 130, Rancho Cordova, CA 95742 (attn. Everett Fischer)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
Pelican Bay State Prison C-10-119
P.O.Box 7500
Crescent City, CA 95532Number of process to be
served with this Form 285

1

Number of parties to be
served in this caseCheck for service
on U.S.A.SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,
All Telephone Numbers, and Estimated Times Available for Service):

Fold

Full name could be Devan Hawke

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

DATE

4/16/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

1

District of
Origin

No. 11

District to
Serve

No. 91

Signature of Authorized USMS Deputy or Clerk

R. J. Jarama

Date

4/16/08

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described
on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Address (complete only different than shown above)

Date

Time

☐ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

\$800

Total Mileage Charges
including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or
(Amount of Refund*)

\$0.00

REMARKS: 3/1/08 - mailed summons w/ pay for
5/14/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment,
if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL
United States District Court
for the
Northern District of California

TO: D. Hawke
California Dept. of Corrections & Rehabilitation
Office of Correctional Safety
2880 Sunrise Boulevard, Suite 130
Rancho, CA 95742

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chrones, et al

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

You MUST COMPLETE the acknowledgment part of this form below, AND RETURN COPIES 1 AND 2 to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico R. Acuna, U.S. Marshal
Signature (USMS Official) - R. Acuna
Clerk

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave.
Street Number and Street Name or P.O. Box No.
San Francisco, CA 94102
City, State and Zip Code
Charles J. [Signature]
Signature

Attorney in Fact
Relationship to Entity/Authority to Receive
5/14/08
Service of Process
5/14/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF

Arcadio S. Acuna

COURT CASE NUMBER

3:07-5423 VRW

DEFENDANT

Lea Ann Chrones

08 AUG

TYPE OF PROCESS

Order, Complaint, Summons

SERVE
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

William Luger CDCR-Correctional Officer

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

CDCR-Office of Correctional Safety 2880 Sunrise Blvd., Ste 130, Rancho Cordova, CA 95742 (attn. Everett Fischer)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
Pelican Bay State Prison C-10-119
P.O. Box 7500
Crescent City, CA 95532Number of process to be
served with this Form 285

1

Number of parties to be
served in this caseCheck for service
on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney or Originator requesting service on behalf of:

☒ PLAINTIFF☐ DEFENDANT

TELEPHONE NUMBER

DATE

4/16/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated.(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

1

District of
Origin

No. 11

District to
Serve

No. 97

Signature of Authorized USMS Deputy or Clerk

Date

4/21/08

I hereby certify and return that ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Address (complete only different than shown above)

Date

Time

☐ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

\$8.00

Total Mileage Charges
including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

0

Amount owed to U.S. Marshal* or
(Amount of Refund*)

\$0.00

REMARKS:

5/1/08 - Mailed Summons w/299 Form
5/14/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 12/15/80
Automated 01/00

U.S. Department of Justice
United States Marshals Service



NOTICE AND ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT BY MAIL

United States District Court
for the
Northern District of California

TO: William Luper
California Dept. of Corrections & Rehabilitation
Office of Correctional Safety
2880 Sunrise Boulevard, Suite 130
Rancho, CA 95742

Civil Action, File Number CV07-05423 VRW

Arcadio S. Acuna

v.

Lea Ann Chrones, et al

The enclosed summons and complaint are served pursuant to Rule 4(e)(1) of the Federal Rules of Civil Procedure, and California State law.

You **MUST COMPLETE** the acknowledgment part of this form below, **AND RETURN COPIES 1 AND 2** to the sender within 20 days. An envelope has been enclosed for this purpose. Keep copy 3 for your records.

YOU MUST SIGN AND DATE THE ACKNOWLEDGMENT ON ALL COPIES. If you are served on behalf of a corporation, unincorporated association (including a partnership), or other entity, you must indicate under your signature your relationship to that entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

If you do not complete and return copies 1 and 2 of this form to the sender within 20 days, you (or the party on whose behalf you are being served) may be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law.

If you do complete and return copies 1 and 2 of this form, you (or the party on whose behalf you are being served) must answer the complaint within 20 days for private defendants and/or 60 days for Federal defendants. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

I declare, under penalty of perjury, that this Notice and Acknowledgment of Receipt of Summons and Complaint By Mail was mailed on this date.

5/1/08
Date of Signature

for Federico Rocha, U.S. Marshal
Signature (USMS Official) R. J. Jenkins, Clerk

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I declare, under penalty of perjury, that I received a copy of the summons and of the complaint in the above captioned manner at:

455 Golden Gate Ave
Street Number and Street Name or P.O. Box No.

San Francisco, CA 94102
City, State and Zip Code

[Signature]
Signature

Attorney in Fact
Relationship to Entity/Authority to Receive

5/14/08
Service of Process

5/14/08
Date of Signature

Copy 1 - Clerk of Court
Copy 2 - United States Marshals Service
Copy 3 - Addressee
Copy 4 - USMS District Suspense

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF
Arcadio S. Acuna
DEFENDANT
Lea Ann ChronesCOURT CASE NUMBER
3:07-5423 VRW
AUG 7 2008 3:57
ORDER OF PROCESS
Order, Complaint, Summons**SERVE
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

M. Ruff CDCR-Correctional Officer

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

CDCR-Office of Correctional Safety 2880 Sunrise Blvd., Ste 130, Rancho Cordova, CA 95742 (attn. Everett Fischer)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Arcadio S. Acuna ID# C-43165
Pelican Bay State Prison C-10-119
P.O.Box 7500
Crescent City, CA 95532Number of process to be
served with this Form 285

1

Number of parties to be
served in this caseCheck for service
on U.S.A.RECEIVED
UNITED STATES MARSHAL
FOLD
NORTHERN DISTRICT
OF CALIFORNIA
08 APR 16 PM 4:12

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Full name could be Michael Ruff

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

DATE

4/16/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINEI acknowledge receipt for the total
number of process indicated.
(Sign only for USM 285 if more
than one USM 285 is submitted)

Total Process

1

District of
Origin

No. 11

District to
Serve

No. 27

Signature of Authorized USMS Deputy or Clerk

Date

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion
then residing in defendant's usual place
of abode

Address (complete only different than shown above)

Date

Time

☐ am
☐ pm

Signature of U.S. Marshal or Deputy

Service Fee

\$8.00

Total Mileage Charges
including endeavors

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal* or
(Amount of Refund*)

\$0.00

REMARKS:

5/1/08 - Mailed Summons w/ 285 Form
5/14/08 - Acknowledged Receipt

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED